

INTERAGENCY COORDINATING COUNCIL COMMITTEE MEETING MINUTES

COMMITTEE: Public Awareness Committee

DATE: May 20, 2004

COMMITTEE MEMBERS

MEMBERS PRESENT: Zelna Banks, Kathleen Colvin, Toni Doman,
Stephanie Pringle Fox, Thomas McCool, Shirley
Stihler

MEMBERS ABSENT: Elaine Schneider, Hedy Hansen, Cynthia Jaynes,
Nenita Herrera-Sioco

DEPT. LIAISONS: Pat Widmann, DDS (absent), Janet Canning, CDE
(absent)

GUESTS: Cheri Schoenborn (DDS)
STAFF: Elissa Provance, WestEd/CPEI

RECORDER: Rosa King (DDS) for Elissa Provance

SUMMARY OF IMPORTANT POINTS, ACTIONS CONSIDERED AND RECOMMENDATIONS

The meeting was called to order by Zelna Banks, representing Elaine Schneider and Hedy Hansen, Co-Chairs, who were unable able to attend the meeting. It was also noted that Kathleen Colvin attended the ICC Executive Committee representing the Public Awareness Committee. Pat Widmann was also not able to attend the meeting. However, Cheri Schoenborn attended and provided guidance and information.

- Elissa Provance and Cheri Schoenborn provided the committee with a summary of the Executive Committee meeting.
- Copies of an updated "Priority Recommendations for Outcomes, Action Plans and Data Sources" were distributed.
- The Executive Committee's charge and priority for PAC was Early Entry. PAC's direction to achieve the Early Entry outcomes was to:
 1. Identify outcomes
 2. Review Data
 3. Identify Additional Data/Information Needed or Missing
 4. Develop a Work Plan/Timelines
 5. Identify committee/interagency collaboration

- The committee brainstormed ideas to reach stated outcome within the next 18 months.
- Current data and information sources were reviewed and additional data needs were identified; see attached.
- Zelna Banks read the following list that she had developed regarding the day's brainstorm activities:

Activity: To identify why some areas have a large population or a high percentage of children served in Early Start.

1. At what age are children entering regional centers?
 - a. How many children are entering?
 - b. Which Regional Centers
 - c. Where are the RCs located (rural, urban, migrant?)?
 - d. Number of children from NICU's
2. What's the percentage of the population served?
 - a. Which RCs have a high percentage of children served?
 - b. Which RCs have a low percentage of children served?
3. What factors are causing the difference in percentage of children served?
 - a. Population by county, region, or local area
 - b. Ethnicity or other cultural characteristics
 - c. Child find/Outreach Activities
 - d. Interagency Collaboration
 - e. Public Awareness products
 - f. FRC support
 - g. Outreach to physicians and primary care providers
 - h. What other agencies are serving and reaching the population?
 - i. Any agencies conducting developmental screenings?
 - j. Other

Activity: Analyze data from recent monitoring visits. Conduct a sampling or a pilot.

1. Get cross representation from various RCs within the state.
2. Start with real data from a real place - use real site monitoring reports
3. Compile data
4. Give to DDS for further analysis, evaluation, and a Summary Report.

Activity: Develop recommendations for best practice activities based upon collection and analysis of data and the Summary Report.

1. Make recommendations for the development and dissemination of products.
 2. Make recommendations for Child Find Trainings and Activities.
- In reviewing IFSP and Transition, PAC recommended that the proposed PAC action items listed on pages 131 and 132 of the May 2004 ICC book continue to be acknowledged as recommendations. PAC also wanted the opportunity to review other committees' recommendations on these two priority items.
 - PAC determined that teleconferences would be helpful before the next ICC Meeting in order to continue to work together, share data, and refine the activities in our work plan.

The meeting was adjourned at 4 pm.

**WORKING DOCUMENT OF THE PUBLIC AWARENESS COMMITTEE (PAC) FOR STRATEGIES
TO ACHIEVE PRIORITY FOR EARLY ENTRY**

May 20, 2004

PROPOSED ACTION PLAN: *Develop a strategy for collecting and identifying outreach practices and identify best practices and models.*

IDENTIFIED OUTCOME FOR EARLY ENTRY	DATA REVIEWED	IDENTIFY ADDITIONAL DATA NEEDED OR MISSING	WORK PLAN / TIMELINE	IDENTIFY COMMITTEE OR INTERAGENCY COLLABORATION
<p>Increase the number and percentage of eligible children served to meet the 2.25% criterion set by OSEP.</p>	<ul style="list-style-type: none"> • DDS' Regional Center Child Find and Public Awareness Activities Matrix (page 30 of ICC packet) • Annual Performance Report (pp. 10, 24-29, starting at page 146 of ICC packet.) 	<ul style="list-style-type: none"> • Low incidence disability data from CDE. • Need to see DDS Monitoring Reports in order to identify RCs that are meeting OSEP requirements; identify activities. • Under Early Entry, need "Data and Information Source" items #1 and #2 by RC. • Diagnosis/reason for referral in order to identify milestones. (page 146/APR, page 10). • Breakdown data within catchment area. • Analysis of number of birth to 3 in Early Start compared to number of birth to 3 in region. (page 164/APR page 28) • Information on intake process (from Ken Freedlander) addressed in monitoring. 	<ol style="list-style-type: none"> 1. Prior to September 2004, collect identified data sources. 2. Collect percentage of population served by catchment area (DDS) – (can this include breakdown by county?) 3. Review Early Entry activities documented in other ICC committees and incorporate activities if indicated or acknowledged. 4. Collect questions to address during monitoring report analysis (committee members). 5. Develop product describing best practice regarding child find. 6. Identify areas of collaboration with other entities, (i.e., CPS regarding CAPTA) – collect data on collaborative efforts. 	<ul style="list-style-type: none"> • Collaboration with other entities/agencies regarding child find – recommendations for best practices regarding referrals to ES. • PAC would like to collaborate with other ICC committees to provide input on their activities regarding IFSP and Transition. • <i>Regarding interagency collaboration, recommend addressing early entry and child find activities at the state and local level.</i>

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		<ul style="list-style-type: none"> ES Statistics Report (need clarification from Ken of this report). 	<p>Additional Recommendations for Achieving Stated Outcome:</p> <ul style="list-style-type: none"> Break down the DDS monitoring questions regarding child find, i.e.: <ul style="list-style-type: none"> Do you make presentations to physicians (pediatricians, NICU doctors, etc.)? Do you make presentations to hospitals -- various personnel, etc., identifying "who" specifically? Identify areas with high % of children served and conduct analysis of monitoring reports to determine quality/quantity of activities. Determine correlation of activities to % served. Prepare "Fact Sheet" of components for child find activities (pp. 160-161 of ICC packet). Disseminate via ES Resources, selected trainings, and website. 	

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			<ul style="list-style-type: none"> • Develop product regarding best practices for child find (present more than one way, i.e., rural vs. urban areas). • Incorporate findings of monitoring reports in statewide trainings to service coordinators and others responsible for child find. • Invite DDS representative (Ken's section) to discuss intake process. • Identify processes used by FRC's during intake. 	